



The support needs of people bereaved by suicide in later life: a comparative thematic analysis of older adults' and professionals' perspectives

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“Suicide is often a traumatic death that can significantly impact on the mental health and wellbeing of those bereaved (older adult)”

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INTRODUCTION

Effective and timely support following a bereavement by suicide can help facilitate coping and adjustment.

Little research has explored the support needs of older people who have been bereaved by suicide in later life.

This study aimed to explore and compare the perspectives of older adults and health and social care professionals (HSCPs) in understanding the support needs of those bereaved by suicide in later life.

METHODS

Participatory methods with peer researchers with lived experience were adopted.

Semi-structured interviews were conducted with older adults (n = 24) and HSCPs (n = 14) working in a range of bereavement support and suicide prevention services.

Art work to capture participants' accounts of their experiences was also generated.

Qualitative data was analysed using a reflexive thematic approach to compare older adults and professionals' perspectives.

FINDINGS

The themes developed were:

- (1) Acknowledging and validating the traumatic impact of bereavement by suicide
- (2) Navigating and struggling through the grief (the importance of support networks)
- (3) 'It's not your fault': addressing self-blame, guilt and the need for a compassionate dialogue
- (4) 'it's a hot potato': others perceived as better equipped in meeting older adults' support needs (undervaluing and stereotyping older adults)
- (5) The need to recognise diverse older adults' experiences of bereavement by suicide (gaps in service provision)

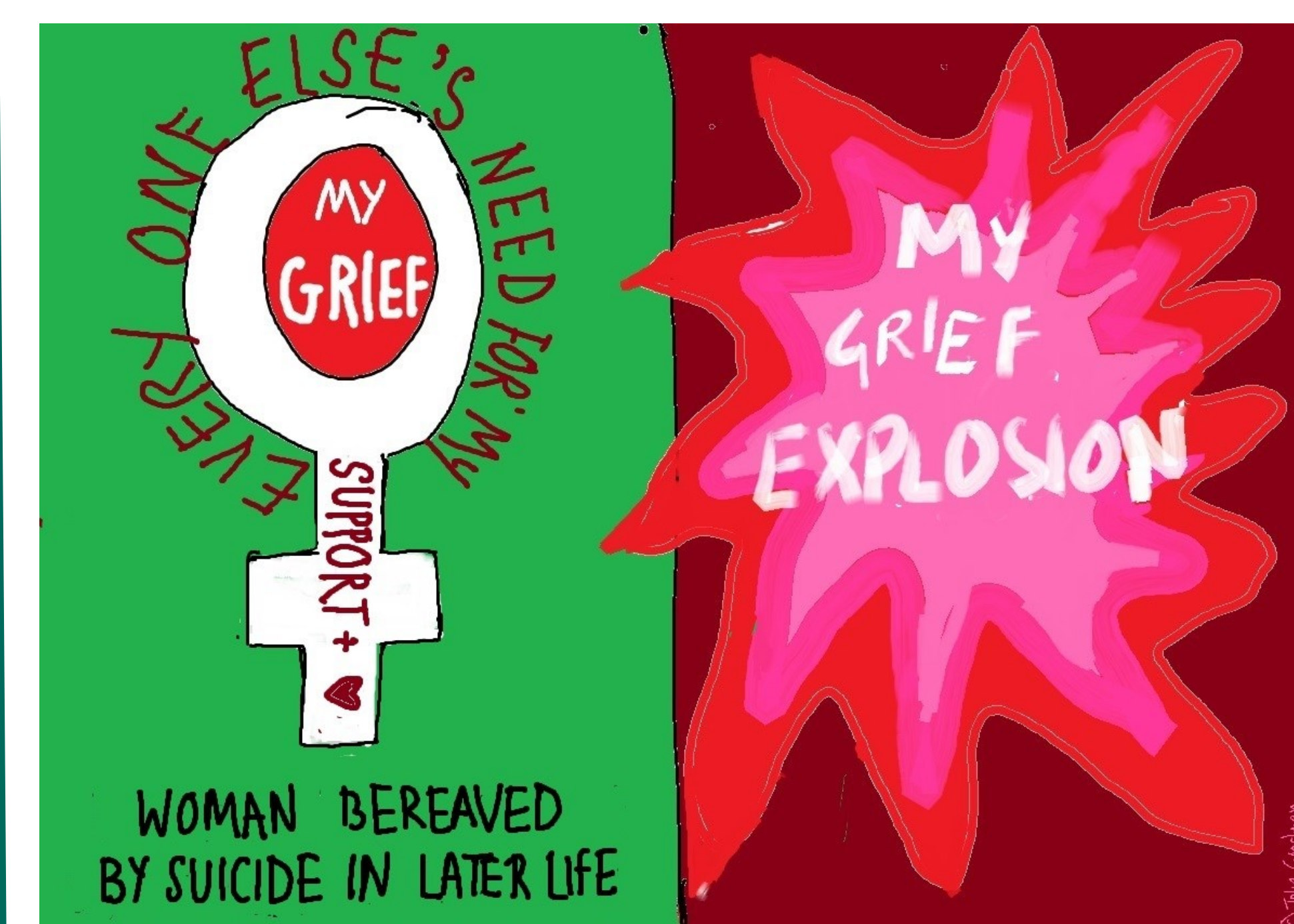


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CONCLUSION & IMPACT

Findings highlighted common challenges and support needs with other age groups as well as specific issues in relation to later life.

Participants reported feeling less valued compared to younger people, experiencing ageism and having fewer opportunities to talk about grief experiences.



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Their experiences were further impacted by stigma, ageist stereotyping, self-blame, shame and dealing with the taboo of suicide.

The need to promote open, honest and compassionate communication about bereavement by suicide in later life is emphasised.

Clearer pathways of support need to be established among health and social care organisations to ensure timely psychosocial care and support for those most vulnerable...

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